



United States Department of State

*Office of Foreign Missions
Washington, D.C. 20520*

NOTICE

Gasoline Tax-Exemption Now Available with CITGO

The Office of Foreign Missions (OFM) recently learned that CITGO has changed their credit card provider and will now provide gasoline tax-exempt credit cards for foreign missions, international organizations and their eligible personnel. Attached is a copy of the CITGO Fleet Commercial Credit Card Application. These applications can also be found at all the participating CITGO gasoline stations.

The applications must be submitted to OFM. Please do not mail or fax applications directly to the gasoline company. Information concerning the provision of tax-exemption on the purchases of gasoline and diesel fuels is available at OFM's website at www.state.gov/ofm/tax/.

For additional questions or comments concerning this information please contact OFM by telephone at (202)-895-3500 option 2, by email at OFMTaxCustoms@state.gov, or the nearest OFM Regional Office.

Attachment 1: CITGO Fleet Commercial Credit Card Application

March 18, 2008

CITGO Fleet COMMERCIAL CREDIT CARD APPLICATION

P.O. Box 923928, Norcross, GA 30010-3928 FAX: 866/512-3076

Please retain original application if transmitted to CITGO by FAX.

Complete application in full.

BILLING TYPE: ☐ Standard - No Fee ☐ Enhanced - \$0 - \$5 per month (See schedule below)



INTERNAL USE ONLY

APP NO. _____

AC NO. _____

BILLING GROUP _____

PROMO 1 _____ PROMO 2 _____

SIC _____ EMP _____

REP _____ MKT _____

Please contact me about access to the CITGO Fleet Online website.

☐ Yes (E-mail address required below)

☐ Receive Electronic Statements

APPLICATION

CREDIT CARD APPLICATION (Please Type or Print Clearly)

BUSINESS NAME

PREFERRED BUSINESS NAME, TRADING NAME OR DBA NAME TO APPEAR ON CREDIT CARD

STREET ADDRESS (PLEASE PROVIDE FULL STREET ADDRESS INCLUDING ZIP IF DIFFERENT THAN MAILING ADDRESS)

MAILING ADDRESS

CITY/TOWN STATE

STATE

ZIP CODE

BUSINESS AREA CODE & PHONE NO.

ALTERNATE PHONE IF FIRST IS A RECORDER OR ANSWERING SERVICE

FAX NO.

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YEARS IN BUSINESS UNDER PRESENT OWNERSHIP

COMPANY ANNUAL SALES VOLUME \$

NO. OF EMPLOYEES EXCLUDING OWNER

TYPE OF BUSINESS: ☐ SOLE PROPRIETORSHIP ☐ PARTNERSHIP ☐ PRIVATE CORP. ☐ LIMITED LIABILITY PARTNERSHIP ☐ LIMITED LIABILITY COMPANY ☐ PUBLIC CORP.

☐ TAX EXEMPT *REQUIRES EXEMPTION CERTIFICATE

DATE OF INC.

FED. I.D. NO.

NATURE OF BUSINESS SERVICES

COMPANY WEB SITE ADDRESS

SPECIFY IF ABOVE COMPANY IS: ☐ FRANCHISE ☐ DIVISION ☐ BRANCH ☐ SUBSIDIARY

LIST NAME AND LOCATION OF HEADQUARTERS AND/OR PARENT FIRM

PRIMARY CONTACT'S NAME

POSITION/TITLE

AREA CODE & TELEPHONE

E-MAIL ADDRESS (Required for website access)

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SECONDARY CONTACT'S NAME

POSITION/TITLE

AREA CODE & TELEPHONE

E-MAIL ADDRESS

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NAME AND RESIDENCE ADDRESS OF OWNER, PARTNERS OR OFFICERS (Also include Personal CITGO Account, if any)

NAME

1

2

3

RESIDENCE ADDRESS

CITY/STATE

SOCIAL SECURITY NO.

CITGO CARDS (IF YOU HAVE/HAD PLEASE LIST ACCOUNT NUMBERS)

REFERENCE

BANK REFERENCE

NAME OF BANK

ADDRESS

CHECKING ACCOUNT NUMBER

NAME OF BANK OFFICER FAMILIAR WITH BUSINESS

AREA CODE & TELEPHONE

FAX NO.

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BUSINESS CREDIT REFERENCES

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

AREA CODE & TELEPHONE

ACCOUNT NUMBER

()

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

AREA CODE & TELEPHONE

ACCOUNT NUMBER

()

FUEL SUPPLIER NOW SELLING TO YOU ON CREDIT

NAME

ACCOUNT NUMBER

AREA CODE & TELEPHONE

()

MAXIMUM AMOUNT OF MONTHLY CREDIT REQUESTED FOR THIS ACCOUNT
MUST BE COMPLETED TO PROCESS APPLICATION \$ /MO.

NO. OF CARDS REQUESTED

ENHANCED FLEET SERVICE CHARGES

up to \$10,000 = \$5

\$10,001 and over = \$0

FEE WILL BE BASED ON ACTUAL MONTHLY BILLING VOLUMES

IF CREDIT CARD IS TO BE RETAINED BY CITGO STATION (STATION CONTROL CARD) PLEASE COMPLETE BELOW.

*NOTE: Some CITGO retailers do not participate in the station control card program.

NAME AND COMPLETE MAILING ADDRESS OF CITGO STATION WHERE CREDIT CARD WILL BE RETAINED.

CITGO STATION LOCATION NUMBER (FROM IMPRINTER SLUG)

I CERTIFY THAT I AM AUTHORIZED TO SUBMIT THIS APPLICATION FOR CREDIT ON BEHALF OF THIS COMPANY

X
SIGNATURE

DATE

X

NAME (PLEASE PRINT OR TYPE)

TITLE

In accepting the card(s) by signing, use or permitting use by others, the abovesigned agrees to Terms and Conditions as contained on and in the folder in which abovesigned receives the card(s), and accordingly, to pay CITGO Petroleum Corporation for purchases made and credit extended with the use of the card(s). It is understood such Terms and Conditions provide, among other things, that late fees not in excess of those permitted by law will be charged.

The abovesigned authorizes CITGO Petroleum Corporation to obtain a credit report on applicant, contact references and provide a copy of this application to those references as deemed necessary by CITGO. Owner(s) of Privately held Corporations and Limited Liability Companies authorize CITGO to investigate the Credit record of owner(s) in determination of a credit decision.